# Victorian Emergency Minimum Dataset (VEMD) User Manual

20<sup>th</sup> Edition 2015-16

## Section 6 Validation Reports and Validations

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# Contents

# SECTION 6: Validation Reports and Validations

## Validation Reports

The following validation reports are provided to the hospital via an Excel spreadsheet, after the transmission has been processed at DHHS.

| Report | Description |
|---|---|
| **Edit Summary** | A table detailing the summary statistics for the submitted file. |
| **Edit List** | List of all records with validations allocated to them<br><br>Files include:<br><br>• Validation Status (Effect)<br><br>• Message (Validation) Name<br><br>• Message (Validation) Description<br><br>• Extract ID, identifies the extract in which the record was last included<br><br>• Unique Key<br><br>• Patient Identifier<br><br>• Error Message (narrative, which is a brief summary of the error and field(s) to be investigated)<br><br>• Campus<br><br>• Arrival Date/Time |
| **Submission Metadata** | A table detailing the following:<br><br>• Campus code of the submitting site<br><br>• The date the file was processed<br><br>• The submission month<br><br>• The date of the first record in the extract<br><br>• The date of the last record in the extract<br><br>• The total number of records received in the file<br><br>• The total number of rejected records<br><br>• The total number of accepted records<br><br>• The total number of deletion records<br><br>• The total number of notifiable validations<br><br>• The total number of rejection validations<br><br>• The total number of warning validations<br><br>• Submission ID<br><br>• Extract file name |

Any record not listed on the Validation List outlined above has passed the input validation process and been accepted into the VEMD. No further action is required on these records, unless the Department of Health and Human Services or the health service, determine the data to be inaccurate or erroneous. All services are expected to conduct regular and timely reconciliation of Validation Reports.

# Validations

## E001  File Naming Convention Invalid

**Effect**          Run Terminated

**Problem**          The filename is not correct.

**Remedy**          Correct the file name and re-submit data to VEMD


                     See:         Section 5: File Naming Convention


## E003  File Contains Invalid Characters

**Effect**          Run Terminated

**Problem**          The file contains a character(s) that is not included in the Valid ASCII Character reference table.

                     This problem can affect the ability of the validation process to identify items and columns.

**Remedy**          You may need to re-submit data. Re-run the file extract procedure. If the error persists contact your software supplier.


## E005  Empty Transaction File

**Effect**          Run Terminated

**Problem**          The file submitted is empty.

                     Either the transmission file is empty, or the extract process to create the file has failed.

**Remedy**          Re run the file extract procedure. If the error persists, contact your software supplier.


## E006  File Delimiting Invalid

**Effect**          Run Terminated

**Problem**          The format of the file is not valid.  Every file submitted for processing on the VEMD must be tab delimited ASCII format with each record separated by a carriage return and line feed.

**Remedy**          Contact your software supplier. Correct the format of the file and re-submit data.

                     See      Section 5:          File Structure

## E007  File Structure Invalid

| | |
|---|---|
| **Effect** | Run Terminated |
| **Problem** | The column sequence or content in the monthly data file is not valid for the corresponding version of the VEMD. |
| **Remedy** | As this error is most likely to occur after annual changes to the VEMD, consult the Specifications for Revisions documents and ensure your software supplier has accommodated the changes. |
| | Re-submit the data in the correct format. |
| | See      Section 5:      File Structure |

## E010  Non VEMD Hospital

| | |
|---|---|
| **Effect** | Run Terminated |
| **Problem** | The Campus Code detailed in this file is not valid for VEMD data provision.  The transmission cannot be accepted. |
| **Remedy** | Correct the code and re-submit. |
| | See    Section 2:      Campus |
| | Section 3:      Campus Code |

## E025  Duplicate Attendance

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | This record has the same Patient Identifier as another record but a different Unique Key, yet the Arrival and Departure Dates/Times of the attendances are either identical or overlap. |
| **Remedy** | Check the Patient Identifier and Unique Key of both attendances: |
| | If Unique Key is wrong, correct it and re-submit the record. |
| | If Patient Identifier is wrong, correct it and re-submit the record. |
| | If both are correct, check Arrival and Departure Dates/Times for the both the existing record and this record.  Correct and re-submit as appropriate. |
| | See      Section 2:    Date/Time Fields |
| | Section 3:    Arrival Date |
| | Arrival Time |
| | Departure Date |
| | Departure Time |
| | Patient Identifier |
| | Unique Key |

## E030  Duplicate Unique Key

**Effect**       **REJECTION**

**Problem**      This record has the same Unique Key as another record but has a different Patient Identifier. Every emergency presentation must be identified by a distinct Unique Key.

**Remedy**       Check the Patient Identifier and Unique Key of all applicable attendances:

If Unique Key is wrong, correct it and re-submit the record;

If the Patient Identifier is wrong, correct it and re-submit the record.

See        Section 3:        Patient Identifier

Unique Key

## E050  Campus Code Invalid

**Effect**       **REJECTION**

**Problem**      Campus Code is a mandatory data item for all emergency attendances.

No Campus Code has been recorded on this file; **OR**

The Campus Code detailed on this file does not exist in the reference table; **OR**

The Campus Code detailed on this record differs from the Campus Code provided in the file name.

**Remedy**       Correct the record or the file name and re-submit.

See        Section 2:        Campus

Section 3:        Campus Code

Section 5:        File Naming Convention

HDSS Website: campus code Table:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E060  Unique Key Invalid

**Effect**       **REJECTION**

**Problem**      The Unique Key is invalid. Unique Key is a mandatory data item for all emergency attendances.

**Remedy**       Correct the Unique Key, and re-submit the record.

The item should be automatically generated by your computer system.

Contact your software supplier if Unique Key is not being generated.

Valid                     Numeric characters

Length equal to 9 characters

Right justified, zero-filled

Invalid                   Blank

Special characters (for example: $, #)

Length not equal to 9 characters.

See        Section 3:        Unique Key

## E065  Patient Identifier Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Patient Identifier is invalid.  Patient Identifier is a mandatory data item for all emergency attendances. |
| **Remedy** | Correct Patient Identifier and re-submit the record. |

|  |  |
|---|---|
| Valid | Numeric / alphabetic characters, Length equal to 10 characters |
| Invalid | Blank |
| | Special characters (for example, $, #) |
| | Length not equal to 10 characters |
| | Embedded spaces |
| See | Section 3:    Patient Identifier |

## E078  DVA Number Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The DVA number supplied is not in the correct format. |
| **Remedy** | Check the DVA number item file structure, correct the DVA number accordingly and re-submit the data. |

| See | Section 3:    DVA Number |
|---|---|
| | Section 5:    File Structure |

## E079  Compensable Status and DVA Number Combination Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | Compensable Status is '2 - Department of Veterans' Affairs', but there is no DVA number; OR |
| | The Compensable Status code is not '2 - Department of Veterans' Affairs', but a DVA number is reported. |
| | A DVA number must only be reported for each DVA compensable patient. |
| **Remedy** | Check whether patient is DVA compensable. |
| | If the patient is DVA, the compensable status must be '2' and a valid DVA number must be submitted. |
| | If the patient is not a DVA patient, correct the Compensable Status and ensure the DVA number item is blank. |

| See | Section 3:    Compensable Status |
|---|---|
| | DVA Number |

## E081  Medicare Number Invalid

**Effect**        REJECTION

**Problem**       The Medicare Number (including Medicare Code) is not valid.

**Remedy**        Correct Medicare Number and re-submit the record.

          See     Section 2:    Medicare Eligibility Status – Eligible Person

                                   Medicare Eligibility Status – Ineligible Person

                  Section 3:    Medicare Number

## E086  Medicare Code and Date of Birth Combination Invalid

**Effect**        REJECTION

**Problem**       The Medicare Code (11th character in the Medicare Number) is zero, but the patient is greater than 12 months old.  A Medicare Code of zero is only acceptable for babes yet to be issued with their own Medicare Number that is, persons under 12 months of age.

**Remedy**        Report the correct Medicare Code for this patient.

          See     Section 3:    Arrival Date

                                   Arrival Time

                                   Date of Birth

                                   Medicare Number

## E087  Medicare Suffix Invalid

**Effect**        REJECTION

**Problem**       The Medicare Suffix reported is not valid.

**Remedy**        Check the Medicare Suffix and Medicare Number and amend as appropriate and re-submit the record.

          If the Medicare Number was not reported but is available, enter the Medicare Number and Suffix.

          See     Section 2:    Medicare Eligibility Status – Eligible Person

                                     Medicare Eligibility Status – Ineligible Person

                  Section 3:    Medicare Number

                                     Medicare Suffix

### E089  Medicare Code and Date of birth Combination Invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The Medicare Code (11th character in the Medicare Number item) is zero, but the patient's Date of Birth indicates that the patient is older than six months. It is unlikely that the patient does not yet have a Medicare Number and Code. |
| **Remedy** | Determine whether the patient is on the family Medicare Card.  If not, remind the family to contact Medicare to address this. |
| | If the Medicare Code is incorrect, correct the Medicare Number and the Code for the patient, and re-submit the record. |

See     Section 3:     Date of Birth

Medicare Number

### E090  Sex Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Sex value has not been reported or the value specified does not exist in the Sex code set. |
| **Remedy** | Allocate an appropriate Sex code and re-submit the record. |

See     Section 3:     Sex

### E092  Sex Indeterminate with Age Greater than or Equal to 90 Days

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Sex value of '3 – Indeterminate' has been reported, but the calculated difference between the dates of Arrival and Birth gives the age at Arrival as 90 days or more.  To be valid with a Sex code of '3', the age of the patient must be less than 90 days. |
| **Remedy** | Check patient's Sex, Arrival Date and Date of Birth, correct as appropriate and re-submit the record. |

See     Section 2:     Age

Section 3:     Arrival Date

Arrival Time

Date of Birth

Sex

## E093  Sex Indeterminate and Age Less Than 90 Days

**Effect**             **WARNING**

**Problem**            A Sex value of '3 – Indeterminate' has been reported. Although the patient is aged less than 90 days, this code is rare, and the patient's record should be checked.

**Remedy**             Correct the Sex item if appropriate and re-submit the record.


See     Section 2:     Age

                       Date/Time Fields

        Section 3:     Arrival Date

                       Arrival Time

                       Date of Birth

                       Sex

        Section 5      Data Quality


## E095  Date of Birth Invalid

**Effect**             **REJECTION**

**Problem**            The Date of Birth is invalid; or is later than the patient's Arrival Date.

**Remedy**             Verify and insert the appropriate Date of Birth and re-submit the record.

                       If the patient's Date of Birth is unknown: enter 0000 (zeros) in DDMM, estimate the patient's age, then calculate the year of birth based on the estimated age of the patient, enter the calculated year of birth in CCYY.  Re-submit the record.

        See     Section 2:     Date/Time Fields

                Section 3:     Arrival Date

                               Arrival Time

                               Date of Birth


## E100  Country of Birth Invalid

**Effect**             **REJECTION**

**Problem**            A Country of Birth value has not been reported or the specified value does not exist in the Country of Birth code set.

**Remedy**             Check patient record and determine country of birth as precisely as possible.

                       Insert appropriate code from Country of Birth code set and re-submit record.


        See     Section 3:     Country of Birth

                HDSS Website: Country of Birth codes:
                http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E102  Unusual Country of Birth

**Effect**          WARNING

**Problem**         One of the following unusual Country of Birth codes has been reported:

| | |
|---|---|
| **0001** | Born at Sea |
| **0002** | Country of Birth, not elsewhere classified |
| **1600** | Antarctica, not further defined |
| **1601 to 1607** | Antarctica territories |
| **3103** | Holy See |

**Remedy**          Check the patient's Country of Birth, correct, if appropriate, re-submit the record.

If you have used '0002 Country of Birth not elsewhere classified' because there is no code for the country, contact the HDSS Helpdesk.

See     Section 3:     Country of Birth

HDSS Website: Country of Birth codes:
http://www.health.vic.gov.au/hdss/reffiles/index.htm


## E103  Invalid Combination of Date of Birth, Arrival Date and Country of Birth

**Effect**          WARNING

**Problem**         The Arrival Date and Date of Birth are the same but the person's birthplace is not Country of Birth 1101 Australia.

It is rare that a baby not born in Australia would be treated in a Victorian Emergency Department on the day of birth.

**Remedy**          Check the Arrival Date, Date of Birth and Country of Birth data items; if necessary, correct as appropriate and re-submit the record.


See     Section 2:     Date/Time Fields

Section 3:     Arrival Date

Arrival Time

Country of Birth

Date of Birth

Section 5     Data Quality

HDSS Website: Country of Birth codes:
http://www.health.vic.gov.au/hdss/reffiles/index.htm


## E105  Indigenous Status Invalid

**Effect**          REJECTION

**Problem**         An Indigenous Status value has not been reported or the value specified does not exist in the Indigenous Status code set.

**Remedy**          Allocate an appropriate Indigenous Status code and re-submit the record.

See    Section 3:    Indigenous Status.

## E107  Aboriginal or Torres Strait Islander Origin but Not Australian Born

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The Indigenous Status specified in this record indicates that the patient is of Aboriginal or Torres Strait Islander origin, but the Country of Birth is not a code specific to Australia (1100 – 1102, 1199). |
| | It is unusual for Aboriginal or Torres Strait Islanders to have been born outside Australia. |
| **Remedy** | Check the Indigenous Status and the Country of Birth data items; if necessary, correct as appropriate and re-submit the record. |

See    Section 3:    Country of Birth

Indigenous Status.

## E110  Preferred Language Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Preferred Language value has not been reported or the value specified does not exist in the Preferred Language code set. |
| | Preferred Language is a mandatory data item for all emergency attendances. |
| **Remedy** | Allocate the appropriate Preferred Language code and re-submit the record. |

See    Section 3:    Country of Birth

Indigenous Status

HDSS Website: Preferred Language reference table:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E115  Postcode/Locality Combination Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Locality specified in the record does not match the reported Postcode as listed in the Locality / Postcode Reference File; |
| **Remedy** | Check Postcode and Locality, correct as appropriate and re-submit the record. |

See    Section 3:    Locality

Section 4:    Locality / Postcode

HDSS Website: Postcode Locality File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E125  Arrival Transport Mode Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | An Arrival Transport Mode has not been reported or the value specified does not exist in the Arrival Transport Mode code set. |
| **Remedy** | Allocate an appropriate Arrival Transport Mode and re-submit the record. |

See     Section 3:     Arrival Transport Mode

## E130  Referred By Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Referred By value has not been reported or the value specified does not exist in the Referred By code set. |
| **Remedy** | Allocate an appropriate Referred By code and re-submit the record. |

See     Section 3:     Referred By

## E135  Transfer Source Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Transfer Source reported in this record does not exist in the Transfer Source Reference Table. |
| **Remedy** | Check the Transfer Source reference table, correct Transfer Source code and re-submit the record. |

See     Section 3:     Transfer Source

HDSS Website: campus code Table:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E136  Referred By and Transfer Source Combination Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The combination of the Referred By and Transfer Source (which indicates transfer from another hospital) data items is invalid. |
| | Refer to Section 4 Business Rules-'Referred by and Transfer Source'. |
| **Remedy** | If patient was transferred from another hospital or campus, correct the Transfer Source and re-submit the record. |
| | If patient was not transferred from another hospital or campus, correct the 'Referred By' to appropriate code and re-submit the record. |

See     Section 3:     Referred By

Transfer Source

## E137  Transfer Destination / Source Equals Campus Code

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Transfer Source code and/or the Transfer Destination code specified in this record are the same as the Campus Code of this hospital. |
| **Remedy** | Check and correct the Transfer Source code and/or Transfer Destination code and re-submit the record. |

      See      Section 3:      Campus Code

                                      Transfer Destination

                                      Transfer Source

              Section 4:      Transfer to Another Hospital

              HDSS Website: campus code Table:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E140  Type of Visit Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Type of Visit value has not been reported or the value specified does not exist in the Type of Visit code set. |
| **Remedy** | Allocate an appropriate Type of Visit code and re-submit the record. |

      See      Section 3:      Type of Visit

## E142  Dead on Arrival Combination Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | At least one of the following fields indicates that the patient was dead on arrival, but at least one of the remaining fields indicates that the patient was NOT dead on arrival.<br><br>Affected Data Fields<br><br>• Arrival Transport Mode<br>• Departure Status<br>• Diagnosis - Primary<br>• Referred to on Departure<br>• Triage Category<br>• Type of Visit<br><br>Refer to Section 4 Business Rules -'Dead on Arrival'. |
| **Remedy** | Ensure that all the fields listed above are accurate, correct any errors and re-submit the record. |

## E145  Compensable Status Invalid

**Effect**        **REJECTION**

**Problem**     A Compensable Status value has not been reported or the value specified does not exist in the Compensable Status code set.

**Remedy**      Allocate an appropriate Compensable Status code and re-submit the record.

See        Section 3:      Compensable Status


## E155  Arrival Date / Time Invalid

**Effect**        **REJECTION**

**Problem**     An Arrival Date/Time has not been reported or the Date/Time specified is in an invalid format.

**Remedy**      Allocate an appropriate Arrival Date and re-submit the record.

See        Section 2:      Date/Time Fields

Section 3:      Arrival Date

Arrival Time


## E165  Triage Date/Time Invalid

**Effect**        **REJECTION**

**Problem**     The Triage Date/Time has not been reported or the Date/Time specified is in an invalid format.

**Remedy**      Allocate the correct Triage Date/Time and re-submit the record.

See        Section 2:      Date/Time Fields

Section 3:      Triage Date

Triage Time

## E167  Triage Date/Time before Arrival Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Triage Date/Time specified in this record is earlier than the Arrival Date/Time. |
| | The Triage Date/Time must be equal to or greater than the Arrival Date/Time. |
| **Remedy** | Check Triage and Arrival Date/Time, correct as appropriate and re-submit the record. |

See        Section 3:        Arrival Date

Arrival Time

Triage Date

Triage Time


## E175  Triage Category Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Triage Category value has not been reported or the value specified does not exist in the Triage Category code set. |
| **Remedy** | Allocate an appropriate Triage Category code and re-submit the record. |

See        Section 3:        Triage Category.


## E180  Nurse Initiation of Patient Management Date/Time Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | Nurse initiation of patient management Date/Time reported is not valid. |
| **Remedy** | Correct Nurse initiation of patient management Date/Time and re-submit the record. |

Refer to Section 4 Business Rules -'Left without Treatment'.

See      Section 2:        Date/Time Fields

Section 3:        Nurse Initiation of Patient Management Date

Nurse Initiation of Patient Management Time

## E181  Nurse Initiation of Patient Management Date/Time before Triage Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Nurse Initiation of Patient Management Date/Time reported is earlier than the Triage Date/Time. |
| | The Nurse Initiation of Patient Management Date/Time must be equal to or greater than the Triage Date/Time. |
| **Remedy** | Check dates and times of Nurse initiation of patient management and Triage, correct as appropriate and re-submit the record. |

See        Section 3:     Triage Date/Time

Nurse Initiation of Patient Management Date/Time

## E182  First Seen By Treating Clinician Date/Time and Departure Status Comb Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | This record has an invalid combination of Clinician Date/Time and Departure Status value. |

Clinician date/time fields include:

- First seen by doctor
- First seen by mental health practitioner
- Nurse initiation of patient management.

Refer to Section 4 Business Rules -'Clinician Date / Time and Departure Status'.

| | |
|---|---|
| **Remedy** | Correct as appropriate and resubmit. |

See        Section 3     First seen by Treating Clinician

Departure Satus

Section 4     Clinician Date/Time and Departure Status

## E195  First Seen By Doctor Date/Time Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The First Seen by Doctor Date/Time reported in this record is not valid. |
| **Remedy** | Correct First Seen by Doctor Date/Time and re-submit the record. |

See        Section 3:     First Seen by Doctor Date

First Seen by Doctor Time

## E196  First Seen By Doctor Date/Time before Triage Date/Time

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The First Seen By Doctor Date/Time reported in this record is earlier than the Triage Date/Time. |
| **Remedy** | Check dates/times of First Seen By Doctor and Triage, correct as appropriate and re-submit the record. |

See        Section 2        Triage

Section 3        First Seen By Doctor Date/Time

Triage Date/Time

## E207  Procedure Code Format Invalid

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The Procedure code reported does not exist in the Procedure Reference Table. |
| | The Procedure code format is not valid. For example, Procedure codes have been separated by more than one curly bracket {{, or include a space. |
| | Procedure code sequence is not valid, for example there is a blank first Procedure followed by a valid Procedure code. |
| | There is a trailing curly bracket. |
| **Remedy** | Check code and formatting and re-submit record. |

See        Section 3:        Procedures

## E210  Departure Date / Time Invalid

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | A Departure Date/Time has not been reported or is invalid. |
| **Remedy** | Allocate an appropriate Departure Date/Time and re-submit the record. |

See        Section 3:        Departure Date

Departure Time

### E212  Departure Date/Time before Nurse Initiation of Patient Management Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Date/Time reported is earlier than the Nurse Initiation of Patient Management Date/Time. |
| **Remedy** | Check dates and time of the Nurse Initiation of Patient Management and Departure, correct as appropriate and re-submit the record. |

    See      Section 3:    Nurse Initiation of Patient Management Date

                                     Nurse Initiation of Patient Management Time

### E213  Departure Date/Time before First Seen By Doctor Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Date/Time reported in this record is earlier than the First Seen By Treating Doctor Date/Time. |
| **Remedy** | Check date/time of First Seen By Doctor and Departure, correct as appropriate and re-submit the record. |

    See      Section 3:    First Seen by Doctor Date

                                       First Seen by Doctor Time

                                     Departure Date

                                       Departure Time

### E217  Departure Date Conflicts with VEMD File Name

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Date is before or after the month specified in the VEMD file name. |
| **Remedy** | If Departure Date is correct, re-submit the record in the correct month. |

Monthly submissions should only contain records for patients who depart in the month specified in the VEMD file name.

#### For example:

If a patient arrives at 11:59pm on 31st July and departs at 1:15am on 1st August, the record should be submitted in the August file and not the July file.

If Departure Date is incorrect, correct item, re-submit in correct month.

    See    Section 2:        Date/Time Fields

                Section 3:        Departure Date

                                      Departure Time

                Section 5:        Period of Extract

## E219  Length of Stay Greater Than 10 Days

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The calculated difference between the Arrival Date and Departure Date gives a Length of Stay greater than 10 days. |
| **Remedy** | Check the Arrival and Departure Dates correct any erroneous items and re-submit the record. |
| | If the Arrival and Departure dates are correct, contact the HDSS Helpdesk. |

| See | Section 2: | Date/Time Fields |
|---|---|---|
| | | Length of Stay (LOS) |
| | Section 3: | Arrival Date |
| | | Arrival Time |
| | | Departure Date |
| | | Departure Time |

## E230  Departure Status Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Departure Status value has not been reported or the value specified does not exist in the Departure Status code set. |
| **Remedy** | Allocate an appropriate Departure Status and re-submit the record |

| See | Section 3: | Referred to on Departure |
|---|---|---|
| | | Dead on Arrival |
| | Section 4: | Left without Treatment |
| | | Transfer to Another Hospital |

## E233  Unregistered Short Stay Observation Unit

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Status is reported as '3 – Registered Short Stay Observation Unit', but the Campus Code entered does not have a registered SOU with Department of Health and Human Services. |
| **Remedy** | Check the Departure Status, correct as appropriate and re-submit the record. If departure status is correct contact the HDSS Helpdesk. |

| See | Section 2: | Short Stay Observation Unit |
|---|---|---|
| | | Campus |
| | Section 3: | Campus Code |
| | | Departure Status |

## E235  Transfer Destination Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Transfer Destination code reported does not exist in the Hospital Code table. |
| **Remedy** | Correct Transfer Destination code and re-submit the record. |

See  Section 2:  Transfer Destination

Section 4:  Transfer to Another Hospital Campus

HDSS Website: campus code Table:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E240  Referred to on Departure Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Referred to on Departure value has not been reported or the value specified does not exist in the Referred to on Departure code set. |
| **Remedy** | Allocate an appropriate Referred to on Departure code and re-submit the record. |

See  Section 3:  Referred to on Departure

Dead on Arrival

Section 4:  Left without Treatment

Transfer to Another Hospital

## E242  Referred to on Departure and Departure Status Combination Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The combination of values in the Referred to on Departure and Departure Status fields is invalid. |
| **Remedy** | Refer to Section 4: Business Rules Departure Status and Referred to on Departure for valid combinations of these data items. |

Correct as appropriate and re-submit the record.

See  Section 3:  Departure Status

Referred to on Departure

## E245  Reason for Transfer Code Invalid

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The Reason for Transfer code reported does not exist in the Reason for Transfer code set. |
| **Remedy** | Correct the Reason for Transfer code, and re-submit the record. |

See     Section 3:          Reason for Transfer

        Section 4:          Transfer to Another Hospital Campus

## E255  Departure Transport Mode Invalid

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The Departure Transport Mode code reported does not exist in the Departure Transport Mode code set. |
| **Remedy** | Correct Departure Transport Mode code and re-submit the record. |

See     Section 3:          Departure Transport Mode

        Section 4:          Transfer to Another Hospital

## E260  Primary Diagnosis Blank

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The Primary Diagnosis has not been specified in this record. |
| **Remedy** | Check Departure Status.  If Departure Status does not equal: |

- 10 – Left after clinical advice regarding treatment options; or
- 11 – Left at own risk, without treatment; or
- 30 – Left after clinical advice regarding treatment – Co-Located GP Clinic'

allocate an appropriate Primary Diagnosis.

Primary Diagnosis is optional for Departure Status 10 and 30.

Alternatively, correct the Departure Status and resubmit the record.

See     Section 2:          Diagnosis

        Section 3:          Departure Status;

                            Diagnosis – Primary Diagnosis

        Section 4:          Dead on Arrival

                            Left without Treatment

                            Transfer to Another Hospital

                            Primary Diagnosis

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E261  Diagnosis Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Diagnosis code reported does not exist in the VEMD ICD–10–AM Library File; **OR** |
| | The Diagnosis code format is not valid, e.g. it has a decimal point (.), forward slash or includes a space; **OR** |
| | There is a blank Primary Diagnosis code, but Additional Diagnosis 1 and/or 2 is complete; **OR** |
| | Primary Diagnosis is complete, Additional Diagnosis 1 is blank, but Additional Diagnosis 2 is complete. |
| **Remedy** | Check the Diagnosis Codes (Primary and Additional) and formatting and re-submit the record. |
| | Contact software supplier to ensure that blank diagnoses are not transmitted to the VEMD. |

See    Section 2        Diagnosis

Section 3        Diagnosis – Additional 1 and 2

Diagnosis – Primary Diagnosis

Section 4        Dead on Arrival

Left without Treatment

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E262  Diagnosis Code and Sex Incompatible

| | |
|---|---|
| **Effect** | **NOTIFIABLE** |
| **Problem** | Diagnosis code(s) reported is not compatible with the patient's sex. Modify for amended code set. |
| **Remedy** | Check code(s) (note validations in the VEMD Library file) and if necessary, correct code(s) and re-submit the record. |
| | Check the sex and if necessary, correct and re-submit the record. |
| | If correct, notify Submit.VEMD@health.vic.gov.au to confirm the accuracy of the record, providing a detailed explanation.  If the information is validated DHHS will accept the record into the VEMD. |

See    Section 2        Diagnosis

Section 3        Diagnosis – Additional 1 and 2

Diagnosis – Primary Diagnosis

Sex

Section 5        Data Quality

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E263  Diagnosis Code and Age Incompatible

**Effect**         **NOTIFIABLE**

**Problem**        Diagnosis code(s) reported is not compatible with the patient's age (as calculated by subtracting Arrival Date from Date of Birth).

**Remedy**         Check code(s) (note validations in the VEMD Library file); if necessary, correct code(s) and re-submit the record.

Check Date of Birth; if necessary, correct and re-submit the record.

If correct, notify Submit.VEMD@health.vic.gov.au to confirm the accuracy of the record, providing a detailed explanation.  If the information is validated DHHS will accept the record into the VEMD.

| See | Section 2 | Age |
|-----|-----------|-----|
|     |           | Date/Time Fields |
|     |           | Diagnosis |
|     | Section 3 | Arrival Date |
|     |           | Arrival Time |
|     |           | Date of Birth |
|     |           | Diagnosis – Additional 1 and 2 |
|     |           | Diagnosis – Primary Diagnosis |
|     |           | Sex |
|     | Section 5 | Data Quality |

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E264  Diagnosis Code and Sex — Check

**Effect**         **WARNING**

**Problem**        Diagnosis code(s) reported is unusual for the patient's sex.

**Remedy**         Check code(s) (note validations in the VEMD Library file); if necessary, correct code(s) and re-submit the record.

Check the sex; if necessary, correct and re-submit the record.

If you consider a sex validation unjustified, notify DHHS via Submit.VEMD@health.vic.gov.au .

| See | Section 2 | Diagnosis |
|-----|-----------|-----------|
|     | Section 3 | Diagnosis – Additional 1 and 2 |
|     |           | Diagnosis – Primary Diagnosis |
|     |           | Sex |

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E265  Diagnosis Code and Age — Check

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | Diagnosis code(s) reported is unusual for the patient's age (as calculated by subtracting Arrival Date from Date of Birth). |
| **Remedy** | Check code(s) (note VEMD Library file validations) and Date of Birth, if needed correct as necessary, and re-submit the record. |

| See | Section 2 | Age |
|---|---|---|
| | | Date/Time Fields |
| | | Diagnosis |
| | Section 3 | Arrival Date |
| | | Arrival Time |
| | | Date of Birth |
| | | Diagnosis – Additional 1 and 2 |
| | | Diagnosis – Primary Diagnosis |

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm


## E281  Nature of Main Injury Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Nature of Main Injury code has not been reported or the value specified does not exist in the Nature of Main Injury code set. |
| | Nature of Main Injury is a mandatory data item for all emergency attendances where any other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30.  If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Nature of Main Injury and re-submit the record. |

| See | Section 2: | Injury Surveillance |
|---|---|---|
| | Section 3: | Nature of Main Injury |
| | Section 4: | Injury Surveillance |
| | | Left without Treatment |
| | | Nature of Main Injury and Body Region |

HDSS Website: VEMD Editing Matrices
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E286  Body Region Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Body Region code has not been reported or the value specified does not exist in the Body Region code set. |
| | Body region is a mandatory data item for all emergency attendances where any other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30.  If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Body Region and re-submit the record. |
| | If the attendance was not due to an injury, remove all Injury Surveillance items and re-submit. |

See     Section 2:          Injury Surveillance

Section 3:          Body Region

Section 4:          Injury Surveillance

Left without Treatment

Nature of Main Injury and Body Region

HDSS Website: VEMD Editing Matrices
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E290  Description of Injury Event Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Description of Injury Event has not been reported or the value detailed in this record is not valid. |
| | The Description of Injury Event item is a mandatory data item for all emergency attendances where any of the other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30.  If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| | The Description of Injury event must be less than or equal to 250 characters. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Description of Injury Event and re-submit the record. |
| | If the Description of Injury event is greater than 250 characters shorten the description and re-submit the record. |
| | This problem should be remedied using in-house validation.  Ensure your software supplier is notified of the problem and necessary corrections are made. |

See     Section 2:          Injury Surveillance

Section 3:          Description of Injury Event

Section 4:          Injury Surveillance.

## E295  Injury Cause Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Injury Cause code has not been reported or the value specified does not exist in the Injury Cause code set. |
| | Injury Cause is a mandatory data item for all emergency attendances where any other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30. If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Injury Cause and re-submit the record. |
| | If the attendance was not due to an injury, remove all Injury Surveillance items and re-submit record. |

See     Section 2:         Injury Surveillance

           Section 3:         Injury Cause

           Section 4:         Injury Surveillance.


## E297  Injury Cause Code and Age Incompatible

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | There is an invalid combination of the Injury Cause code and the patient's age (as calculated from subtracting Date of Birth from Arrival Date). |
| | The Injury Cause is '1 - Motor Vehicle driver', or '3 - Motorcycle driver', but the patient's age is less than 14 years. |
| **Remedy** | Check Injury Cause code and Date of Birth, correct if appropriate and re-submit the record. |

See     Section 2:         Age

           Section 3:         Arrival Date

                         Arrival Time

                         Date of Birth

                         Injury Cause

           Section 4:         Injury Surveillance

## E300 Human Intent Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Human Intent code has not been reported or the value specified does not exist in the Human Intent code set. |
| | Human Intent is a mandatory data item for all emergency attendances where any other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30. If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Human Intent code and re-submit the record. |
| | If the attendance was not due to an injury, remove all Injury Surveillance items and re-submit record. |

See    Section 2:    Injury Surveillance

Section 3:    Human Intent

Section 4:    Injury Surveillance

## E302 Human Intent Code and Age Incompatible

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | There is an invalid combination of the Human Intent code and the patient's age (as calculated from subtracting Date of Birth from Arrival Date). |

If Human Intent is:

- '2 - Intentional Self-harm':  age should be greater than 10 years

- '4 - Child neglect, maltreatment by parent, guardian':  age should be less than or equal to 15 years

- '5 - Maltreatment, assault by domestic partner':  age should be greater than 15 years

| | |
|---|---|
| **Remedy** | Check Human Intent code and Date of Birth, correct as appropriate and re-submit the record. |

See    Section 2:    Age

Section 3:    Arrival Date

Arrival Time

Date of Birth

Human Intent

Section 4:    Injury Surveillance

## E305  Place Where Injury Occurred Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Place Where Injury Occurred code has not been reported or the value specified does not exist in the Place Where Injury Occurred code set. |
| | Place Where Injury Occurred is a mandatory data item for all emergency attendances where any other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30.  If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Place Where Injury Occurred and re-submit the record. |
| | If the attendance was not due to an injury, remove all Injury Surveillance items and re-submit record. |

See        Section 3:            Place Where Injury Occurred

             Section 4:            Injury Surveillance


## E310  Activity When Injured Code Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Activity When Injured code has not been reported or the value specified does not exist in the Activity When Injured code set. |
| | Activity When Injured is a mandatory data item for all emergency attendances if any other Injury Surveillance items have been completed, except for presentations with a Departure Status of 10,11 or 30.  If Departure Status is 10, 11 or 30 record as many Injury Surveillance fields as were collected prior to the patient's departure. |
| **Remedy** | If the attendance was due to an injury, allocate an appropriate Activity When Injured and re-submit the record. |
| | If the attendance was not due to an injury, remove all Injury Surveillance items and re-submit record. |

See        Section 3:            Activity When Injured

             Section 4:            Injury Surveillance

## E320  Nature of Main Injury/Body Region/Primary Diagnosis Combination invalid

| | |
|---|---|
| **Effect** | WARNING |
| **Problem** | Nature of Main Injury , Body Region and Primary Diagnosis do not correspond according to the Nature of Main Injury/Body Region Matrix Editing Tables |
| **Remedy** | Check Body Region Matrix; correct as appropriate, re-submit the record. |

See        Section 2:        Diagnosis

Injury Surveillance

Section 3:        Body Region

Diagnosis – Primary Diagnosis

Nature of Main Injury

Section 4:        Injury Surveillance

Nature of Main Injury and Body Region

HDSS Website:VEMD Editing Matrices:
http://www.health.vic.gov.au/hdss/reffiles/index.htm


## E340  Departure Date/Time Less Than or Equal to Arrival Date/Time

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The Departure Date specified in this record is earlier than the Arrival Date; **OR** |
| | The record's Departure Date equals the Arrival Date, but the Departure Time is equal to or less than the Arrival Time. |
| **Remedy** | The Departure Date must be a date equal to or later than the Arrival Date. |

If the Arrival and Departure Date items are the same, the Departure Time **must** be later than the Arrival Time (i.e. Total Length of Stay cannot be less than one minute).

Confirm Arrival and Departure Dates and Times, correct as appropriate and re-submit the record.

See        Section 3:        Arrival Date

Arrival Time

Departure Date

Departure Time

## E341  Primary Diagnosis Equals 'Z099' but Additional Diagnosis Blank

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | The Primary Diagnosis code in this record is 'Z099 – Attendance for Follow-up (includes injections) / Review following earlier treatment' but the Additional Diagnosis Code is blank. |
| | An Additional Diagnosis code is a mandatory data item for all emergency attendances with a Primary Diagnosis of 'Z099'. |
| **Remedy** | Allocate the appropriate Additional Diagnosis code to identify the condition under review during this emergency attendance. |

See Section 3: Diagnosis – Additional Diagnosis 1 and 2

Diagnosis – Primary Diagnosis

Section 4: Primary Diagnosis

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E342  Invalid Combination between Primary Diagnosis and Departure Status

| | |
|---|---|
| **Effect** | REJECTION |
| **Problem** | This record has an invalid combination of Departure status and Primary Diagnosis. |
| | Refer to Section 4 Business Rules: Primary Diagnosis. |
| **Remedy** | Ensure that the recorded Departure Status is correct.  Correct any Diagnosis Codes and re-submit the record. |

See Section 3: Departure Status

Diagnosis – Primary Diagnosis

Section 4: Primary Diagnosis

Left without Treatment

## E350  Length of Stay Greater Than 4 and Less Than 10 Days

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The calculated difference between the Arrival Date/Time and Departure Date/Time gives a Length of Stay greater than 4 days but less than 10 days. |
| **Remedy** | Check the Arrival and Departure Date/Times, correct any erroneous items and re-submit the record. |

| See | Section 2: | Length of Stay (LOS) |
|---|---|---|
| | Section 3: | Arrival Date |
| | | Arrival Time |
| | | Departure Date |
| | | Departure Time |
| | Section 5: | Data Quality |

## E351  Potentially Excessive Time to Initiation of Patient Management

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The Time to Treatment exceeds the value for the corresponding Triage category in the following table: |

| | |
|---|---|
| 1 – Resuscitation | 1 minute |
| 2 – Emergency | 120 minutes |
| 3 – Urgent | 360 minutes |
| 4 – Semi Urgent | 720 minutes |
| 5 – Non Urgent | 720 minutes |
| 6 – Dead on Arrival | 360 minutes |

| | |
|---|---|
| **Remedy** | Check documentation to determine whether the calculation of Time to initiation of patient management is correct. |

- The following fields require investigation and possible corrective action:
- Arrival Date/Time
- Nurse Initiation of Patient Management Date/Time
- First Seen by Doctor Date/Time,
- First Seen by Mental Health Practitioner Date/Time,
- Triage Category

Correct and resubmit as required.

| See | Section 2: | Time to Initiation of Patient Management |
|---|---|---|

## E354  Type of Usual Accommodation Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | A Type of Usual Accommodation value has not been reported or the value specified does not exist in the Type of Usual Accommodation code set. |
| **Remedy** | Allocate an appropriate Type of Usual Accommodation and re-submit the record. |

See     Section 3:        Type of Usual Accommodation

## E355  Type of Usual Accommodation and Age Combination Invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | A Type of Usual Accommodation value of '1 – Private Residence, living alone' or '3 - Residential aged care facility -includes both high care (nursing home) and low (hostel) care' has been reported in this record: however, the age of the patient is calculated as less than 15 years.<br>It is unlikely that a child aged 15 years or under would be living in either of these accommodation types. |
| **Remedy** | If the data reported is incorrect, correct the appropriate data field and re-submit the record. |

See     Section 2:        Age

        Section 3:        Arrival Date

                          Arrival Time

                          Date of Birth

                          Type of Usual Accommodation

        Section 5         Data Quality

## E356  Type of Usual Accommodation and Departure Status Combination Invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The record's Type of Usual Accommodation is '11 – Prison/Remand Centre/Youth Training Centre' but the Departure Status is 5, 10, 11, 23, 24 or 30. It is unlikely that a patient with an identified Type of Usual Accommodation of 11 would have a Departure Status other than 12 indicating the patient remains in custodial care. |
| **Remedy** | Correct as appropriate and re transmit. |

## E357  Type of Usual Accommodation and Medicare Suffix Combination Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The record's Type of Usual Accommodation is '11 – Prison/Remand Centre/Youth Training Centre' but the Medicare Suffix is not 'P-N'. Persons held in custodial care are not eligible for Medicare and therefore should always have a Medicare Suffix equal to 'P-N'. |
| **Remedy** | Correct as appropriate and re transmit. |

| | | |
|---|---|---|
| See | Section 2: | Medicare Eligibility Status |
| | Section 3: | Medicare Suffix |
| | | Type of Usual Accommodation |

## E358  Interpreter Required Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | An Interpreter Required value has not been reported or the value specified does not exist in the Interpreter Required code set. |
| **Remedy** | Correct as appropriate and re-submit. |

| | | |
|---|---|---|
| See | Section 3: | Interpreter Required |

## E359  Invalid Combination Interpreter Required /Preferred Language

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The record has an invalid combination of Interpreter Required and Preferred Language. |
| **Remedy** | Correct as appropriate and re-submit. |

| | | |
|---|---|---|
| See | Section 3: | Interpreter Required |
| | | Preferred Language |

HDSS Website: Preferred Language ASCL Codeset:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E360  Indigenous Status / Preferred Language Mismatch

| | |
|---|---|
| **Effect** | WARNING |
| **Problem** | Indigenous Status (1, 2 or 3) indicates a person of Aboriginal or Torres Strait Islander origin but Preferred Language is not in the code set of languages commonly associated with indigenous status. |
| **Remedy** | Check the Indigenous Status and Preferred Language values, correct any errors and re-submit the record. |

| | | |
|---|---|---|
| See | Section 3: | Indigenous Status |
| | | Preferred Language |
| | Section 5: | Data Quality |

HDSS Website: Preferred Language ASCL Codeset:
http://www.health.vic.gov.au/hdss/reffiles/index.htm


## E361  Preferred Language is Unspecified

| | |
|---|---|
| **Effect** | WARNING |
| **Problem** | Preferred Language indicates unspecified status (9000, 0000, 0002). |
| **Remedy** | Check Preferred Language, amend as appropriate if necessary, and re transmit the record. |

| | | |
|---|---|---|
| See | Section 3: | Preferred Language |

HDSS Website: Preferred Language ASCL Codeset:
http://www.health.vic.gov.au/hdss/reffiles/index.htm


## E364  Medicare Last Digit Zero; Suffix Not 'BAB'

| | |
|---|---|
| **Effect** | WARNING |
| **Problem** | The Medicare Number's final digit (Medicare Code) is zero (indicating the patient is not yet included on the family's Medicare card) but the Medicare Suffix is not 'BAB - Unnamed neonate'. |
| **Remedy** | Check Medicare Number and Medicare Suffix, amend as appropriate if necessary, and re transmit.  If the baby is named, he/she should be registered with Medicare. |

| | | |
|---|---|---|
| See | Section 2: | Medicare Eligibility Status |
| | Section 3: | Medicare Number |
| | | Medicare Suffix |

## E366  Departure Status and Triage Category Combination Invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The records Departure Status is '10 – Left after clinical advice regarding treatment options','11 – Left at own risk, without treatment' or '30 – Left after clinical advice regarding treatment options – GP Co-Located clinic' - but the patient has a Triage Category of '1 – Resuscitation'. |
| **Remedy** | Check Departure Status, Triage Category and amend as appropriate if necessary, and re-transmit. |

|  | See | Section 3: | Departure Status |
|---|---|---|---|
|  |  |  | Triage Category |
|  |  | Section 4: | Left without Treatment |
|  |  | Section 5: | Data Quality |

## E370  Sex Code 'Intersex' – Check

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | This record's Sex is '4 – Intersex', the patient's record should be checked. |
| **Remedy** | Correct the Sex item if appropriate, and re-submit the record. |

|  | See | Section 3: | Sex. |
|---|---|---|---|
|  |  | Section 5: | Data Quality |

## E371  Transfer Source equals '9999 – Unknown'

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The Transfer Source reported in this record is '9999 – Unknown' |
| **Remedy** | Confirm the Transfer Source, check the Transfer Source reference table, correct Transfer Source code and re-submit the record. |

If the Transfer Source is unknown, contact HDSS Helpdesk.

See     Section 5 Data Quality

HDSS Website: Hospital Code Table at:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E372  Age Invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The age of this patient is more than 105 years. |
| | Age is calculated as: Arrival Date – Date of Birth. |
| **Remedy** | Check Arrival Date and Time, Date of Birth. Correct, if appropriate, and re-submit. |
| | If correct, contact DHHS via Submit.VEMD@health.vic.gov.au to confirm the accuracy of the record, providing a detailed explanation. |

See      Section 2:      Date/Time Fields

              Section 3:      Arrival Date

                               Arrival Time

                               Date of Birth

              Section 5:      Data Quality

## E373  First Seen By Mental Health Practitioner Date/Time before Arrival Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The First Seen By Mental Health Practitioner Date/Time reported is earlier than the Arrival Date/Time.  Either or both date/times may be incorrect. |
| | The First Seen By Mental Health Practitioner Date/Time must be equal to or greater than the Arrival Date/Time. |
| **Remedy** | Check dates and times for |

- First Seen By Mental Health Practitioner, and
- Arrival

Correct as appropriate and re-submit the record.

See      Section 3:      First Seen by Mental Health Practitioner

                               Arrival Date

                               Arrival Time

## E374  Departure Date/Time before First Seen By Mental Health Practitioner Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Date/Time reported in this record is earlier than the First Seen By Mental Health Practitioner Date/Time.  Either or both date/times may be incorrect. |
| **Remedy** | Check date/times for: |

- First Seen By Mental Health Practitioner
- Departure

See       Section 3:       First Seen by Mental Health Practitioner

Departure Date

Departure Time

## E375  First Seen By Mental Health Practitioner Date/Time Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The First Seen by Mental Health Practitioner Date/Time reported in this record is not valid. |
| **Remedy** | Correct First Seen by Mental Health Practitioner Date/Time and re-submit the record. |

See     Section 3:       First Seen By Mental Health Practitioner Date

First Seen by Mental Health Practitioner Time

## E376  Unregistered Medical Assessment and Planning Unit

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Status is reported as 14 - Medical Assessment and Planning Unit, but the Campus Code entered does not have a registered MAPU with DHHS. |
| **Remedy** | Check the Departure Status, correct as appropriate and re-submit the record. |

If you believe the campus drives have a registered MAPU please contact HDSS Helpdesk.

See     Section 3:       Departure Status

## E377  Unregistered Intensive Care Unit

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Status is reported as 15 – Intensive Care Unit, but the campus does not have an ICU approved by DHHS. |
| **Remedy** | Check the Departure Status, correct as appropriate and re-submit the record. |

If you believe he campus does have an approved ICU contact the HDSS Helpdesk.

See     Section 3:       Departure Status

## E378  Unregistered Coronary Care Unit

**Effect**         REJECTION

**Problem**        The Departure Status is reported as 22 – Coronary Care Unit, but the campus
                   does not have a CCU approved by DHHS.

**Remedy**         Check the Departure Status, correct as appropriate and re-submit the record.

                   If you believe the campus does have an approved CCU contact the HDSS
                   Helpdesk.

                   See      Section 3:          Departure Status


## E382  Unregistered MH Obs/Assess Unit

**Effect**         REJECTION

**Problem**        The Departure Status is reported as 25 Mental Health Observation/Assessment
                   Unit, but the reported Campus does not have a registered Mental Health
                   Observation Assessment Unit, Psychiatric Assessment and Planning Unit or
                   other similar registered unit.

**Remedy**         Check the Departure Status, correct as appropriate and re-submit the record.

                   If the believe the campus does have a registered MH Observation Assessment
                   Unit, Psychiatric Assessment and Planning Unit or other similar requested unit
                   contact the HDSS Helpdesk.

## E383  Invalid Date of Birth Accuracy code

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | This record's Date of Birth Accuracy code is null or invalid. |
| **Remedy** | Check Date of Birth Accuracy for valid format and values. |

See        Section 3:    Date of Birth

Date of Birth Accuracy Code

## E384  Campus does not have a designated GP Co-Located Clinic

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Status is reported as 30 – Left after clinical advice regarding treatment options – GP Co-Located Clinic, but the reported Campus does not have a designated GP Co-Located GP Clinic. |
| **Remedy** | Check the Departure Status, correct as appropriate and re-submit the record. |

## E385  Potentially excessive Length of Stay in ED

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | The Length of Stay (LOS) in the Emergency Department for this record is calculated as greater than 24 hours.  Length of Stay is a derived item calculated as [Departure Date/Time] minus [Arrival Date/Time]. |
| **Remedy** | Check documentation to determine whether the LOS is correct. The following fields require investigation: |

Arrival Date/Time

Departure Date/Time

If accurate, no further action is required.

If not accurate, correct and resubmit

See        Section 2:    Date/Time fields

Length of Stay

Section 3    Arrival Date/Time

Departure Date/Time

## E386  Unexpected Combination between Triage Category and Type of Visit

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | A presentation with Triage Category 1 or 2 has been reported with a Type of Visit of:<br><br>2 – Return Visit Planned<br><br>8 – Pre-arranged admission – clerical, nursing, clinical<br><br>9 – Patient in transit<br><br>These combinations are unlikely and require further investigation. |
| **Remedy** | Correct as appropriate and retransmit. |

| | See | Section 2: | Triage |
|---|---|---|---|
| | | Section 3: | Triage Category |
| | | | Type of Visit |

## E387  Triage Date/Time after Departure Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Triage Date/Time specified in this record is later than the Departure Date/Time.<br><br>The Triage Date/Time cannot be greater than the Departure Date/Time. |
| **Remedy** | Check Triage and Departure Date/Time, correct as appropriate and re-submit the record. |

| | See | Section 3: | Departure Date |
|---|---|---|---|
| | | | Departure Time |
| | | | Triage Date |
| | | | Triage Time |

## E388  First Seen By Mental Health Practitioner before Triage Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The First Seen by Mental Health Practitioner Date/Time reported in this record is earlier than the Triage Date/Time. |
| **Remedy** | Check dates/times of First Seen by Mental Health Practitioner and Triage, correct as appropriate and re-submit the record. |

| | See | Section 3: | First Seen by Mental Health Practitioner Date |
|---|---|---|---|
| | | | First Seen by Mental Health Practitioner Time |
| | | | Triage Date |
| | | | Triage Time |

## E389  Triage Category 1 patient - Excessive Time to Initiation of Patient Management

| | |
|---|---|
| **Effect** | **NOTIFIABLE** |
| **Problem** | This presentation is reported as Triage Category 1 and the Time to Treatment (in minutes) exceeds 1 minute. |
| **Remedy** | Check documentation to determine whether the Triage Category reported is correct. Check documentation to determine whether Arrival Date/Time and First Seen By Date/Times are correct. |

The following fields require investigation and possible corrective action:

- Arrival Date/Time
- Nurse Initiation of Patient Management Date/Time
- First Seen by Doctor Date/Time,
- First Seen by Mental Health Practitioner Date/Time,
- Triage Category

Correct and resubmit as required or notify DHHS immediately.

See  Section 2:  Time to Initiation of Patient Management

Section 5:  Data Quality – Notifiable Validations

## E390  Additional Diagnosis 1 or 2 equals 'Z099'

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | Code Z099 – Attendance for Follow-up (includes injections)/Review following earlier treatment' is reported in either of the Additional Diagnosis 1 or 2 fields. |
| | Code Z099 can only be reported in the Primary Diagnosis field. |
| **Remedy** | Correct and resubmit. |

See  Section 3:  Diagnosis – Additional Diagnosis 1 and 2

Diagnosis – Primary Diagnosis

Section 4:  Primary Diagnosis

HDSS Website: VEMD ICD-10-AM Library File:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E391  The Primary Diagnosis for this record requires the completion of all Injury Surveillance data elements

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Primary Diagnosis contains an injury ('S' or 'T') code which is flagged in the VEMD Editing Matrices as requiring mandatory completion of **all** injury surveillance items, but at least one of these elements is missing or invalid. |
| **Remedy** | Check Injury Surveillance fields and Primary Diagnosis; correct as appropriate, re-submit the record. |

| See | Section 2: | Diagnosis |
|---|---|---|
| | | Injury Surveillance |
| | Section 3: | Diagnosis – Primary Diagnosis |
| | | Activity when Injured |
| | | Body Region |
| | | Description of Main Injury Event |
| | | Human Intent |
| | | Injury Cause |
| | | Nature of Main Injury |
| | | Place where Injury occurred |
| | Section 4: | Injury Surveillance |

HDSS Website: VEMD Editing Matrices:
http://www.health.vic.gov.au/hdss/reffiles/index.htm

## E392  Invalid Ambulance Case Number

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | A value has been reported that does not exist within the Ambulance Case Number valid ranges. |
| **Remedy** | Correct and resubmit |

| See | Section 3: | Ambulance Case Number |
|---|---|---|

## E393  Clinical Decision to Admit Date/Time and Departure Status Combination Invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | Departure Status is 3, 14, 15, 18, 22, 25, 26, 27, 28 but no Clinical Decision to Admit Date/Time has been recorded. |
| **Remedy** | Check Departure Status and Clinical Decision to Admit fields, correct as appropriate and re-submit the record. |

|  | See | Section 2: | Date/Time Fields |
|---|---|---|---|
| | | Section 3: | Departure Status |
| | | | Clinical Decision to Admit Date |
| | | | Clinical Decision to Admit Time |

## E394 Departure Date/Time Before Clinical Decision to Admit Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Departure Date/Time reported in this record is earlier than the Clinical Decision to Admit Date/Time. |
| **Remedy** | Check Date/Time of Clinical Decision to Admit and Departure, correct as appropriate and re-submit the record. |

|  | See | Section 3: | Departure Date |
|---|---|---|---|
| | | | Departure Time |
| | | | Clinical Decision to Admit Date |
| | | | Clinical Decision to Admit Time |

## E395 Clinical Decision to Admit Date/Time Before Arrival Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Clinical Decision to Admit Date/Time reported is earlier than the Arrival Date/Time. |
| **Remedy** | Check Date/Time of Clinical Decision to Admit and Arrival, correct as appropriate and re-submit the record. |

|  | See | Section 3: | Arrival Date |
|---|---|---|---|
| | | | Arrival Time |
| | | | Clinical Decision to Admit Date |
| | | | Clinical Decision to Admit Time |

## E396 Clinical Decision to Admit Date/Time Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Clinical Decision to Admit Date/Time is not valid. |
| **Remedy** | Correct Clinical Decision to Admit Date/Time and re-submit the record. |

See      Section 3:      Clinical Decision to Admit Date

Clinical Decision to Admit Time

## E397 Ambulance at Destination Date/Time and Arrival Transport Mode invalid

| | |
|---|---|
| **Effect** | **WARNING** |
| **Problem** | Ambulance at Destination Date is blank AND the Arrival Transport Mode is 1, 2 or 3; OR |
| | Ambulance at Destination Time is blank AND the Arrival Transport Mode is 1, 2 or 3; OR |
| | Ambulance at Destination Date is NOT blank AND the Arrival Transport Mode is NOT 1, 2, or 3; OR |
| | Ambulance at Destination Time is NOT blank AND the Arrival Transport Mode is NOT 1, 2, or 3 |
| **Remedy** | Correct Ambulance at Destination Date/Time and re-submit the record. Check whether patient arrived by Ambulance. |
| | If the patient did arrive by Ambulance, and Arrival Transport Mode is 1, 2 or 3, 9 valid Ambulance at Destination Date and Ambulance at Destination Time must be submitted. |
| | If the patient did not arrive by emergency Ambulance, correct the Arrival Transport Mode and ensure the Ambulance at Destination Date and Ambulance at Destination Time are blank |

See      Section 3:      Ambulance at Destination Date

Ambulance at Destination Time

Arrival Transport Mode

## E398 Ambulance at Destination Date/Time Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Ambulance at Destination Date/Time specified is in an invalid format. |
| **Remedy** | Correct and re-submit the record. |

| | | |
|---|---|---|
| See | Section 2: | Date/Time Fields |
| | Section 3: | Ambulance at Destination Date |
| | | Ambulance at Destination Time |


## E399 Ambulance Handover Complete Date/Time Invalid

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Ambulance Handover Complete Date/Time specified is in an invalid format. |
| **Remedy** | Correct and re-submit the record. |

| | | |
|---|---|---|
| See | Section 2: | Date/Time Fields |
| | Section 3: | Ambulance Handover Complete Date |
| | | Ambulance Handover Complete Time |


## E400 Triage Date/Time before Ambulance at Destination Date/Time

| | |
|---|---|
| **Effect** | **REJECTION** |
| **Problem** | The Ambulance at Destination Date/Time specified in this record is later than the Triage Date/Time |
| | The Ambulance at Destination Date/Time cannot be greater than the Triage Date/Time. |
| **Remedy** | Check Triage date/time and Ambulance at DestinationDate/Time, correct as appropriate and re-submit the record. |

| | | |
|---|---|---|
| See | Section 3: | Ambulance at Destination Date |
| | | Ambulance at Destination Time |
| | | Triage Date |
| | | Triage Time |

## E401 Ambulance Handover Complete Date/Time and Arrival Transport Mode combination invalid

| | |
|---|---|
| **Effect** | WARNING |
| **Problem** | Ambulance Handover Complete Date is blank AND the Arrival Transport Mode is 1, 2 or 3; OR |
| | Ambulance Handover Complete Time is blank AND the Arrival Transport Mode is 1, 2 or 3; OR |
| | Ambulance Handover Complete Date is NOT blank AND the Arrival Transport Mode is NOT 1, 2 or 3 OR |
| | Ambulance Handover Time is NOT blank AND the Arrival Transport Mode is NOT 1, 2, or 3 |
| **Remedy** | If the patient arrived by emergency ambulance, Arrival Transport Mode must be '1' '2' or '3' and valid Ambulance Handover Complete Date and Time must be submitted. |
| | If the patient did not arrive by emergency ambulance, correct the Arrival Transport Mode and ensure the Ambulance Handover Complete Date and Time are not submitted |

See        Section 3:        Ambulance Handover Complete Date

Ambulance Handover Complete Time

Arrival Transport Mode